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Applicant: Gasparrini et al.
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FOREIGN PATENT DOCUMENTS

Examiner Initial	Patent Number	Publication Date	Country/Issuing Body	Class	Sub-Class	Translation
ZE	DE 2004511	8/05/71	Germany			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
ZE	DE 2804801	8/09/79	Germany (Abstract only)			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
ZE	DE 3736397	5/11/89	Germany (Abstract only)			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
ZE	DE 3907611	9/13/90	Germany (Abstract only)			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
ZE	JP 2008055	1/11/90	Japan (Abstract only)			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
ZE	JP 2011329	1/16/90	Japan (Abstract only)			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
ZE	JP 3001952	1/8/91	Japan (Abstract only)			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
ZE	JP 3043270	4/23/91	Japan (Abstract only)			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
ZE	JP 4258244	9/14/92	Japan (Abstract only)			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
ZE	JP 4823503	03/27/73	Japan			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
ZE	JP 5015470	1/26/93	Japan (Abstract only)			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
ZE	JP 5149242	12/25/76	Japan			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
ZE	JP 5601230	1/12/81	Japan (Abstract only)			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
ZE	JP 63020525	Filed 2/18/88	Japan (Abstract only)			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

OTHER DOCUMENTS (Including Author, Title, Date, etc.)

Examiner	EL-Arini	Date Considered	11/04/04
EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP §609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to Applicant.			